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TO:	USPTO	FAX NUMBER:	(703) 872-9306
FROM:	William Lee	PHONE NUMBER:	(908) 298-2161
TOTAL NO. OF PAGES INCLUDING COVER	33	DATE	May 9, 2005

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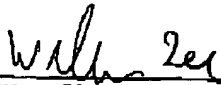
In re Application of: *Chung Shih et al.*
For Patent For: **IMPROVED GROWTH STIMULANT COMPOSITIONS**
Group Art Unit: 1616
Attorney Docket No.: AH0948Q; US Serial No.: 09/431,519
Filed: 11/01/1999

Dear Examiner:

Transmitted here with are:

- Fax Cover Sheet - 1 Page
- Certificate of Fax Transmission - 1 Page
- Response Transmittal - 1 Page
- Fee Transmittal - 1 Page in dupl.
- Petition for Extension of time (2 Months) - 1 Page
- Response to Final Office Action - 9 Pages
- IDS - 2 Pages
- PTO 1449 - 1 Page in dupl.
- Reference (1) - 14 Pages

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William Y. Lee
Registration No. 46,100

PHONE: (908) 298-2161

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Attorney Docket No.: AH0948Q

Application No.: 09/431,519

Filing Date: 11/01/1999

First Named Inventor: Chung Shih, et al.

PTO/SB/97 (08-03)

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PTO-1449 (1 pg. in dupl.)

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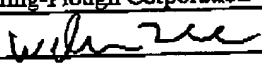
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/431,519
	Filing Date	11/01/1999
	First Named Inventor	Chung Shih, et al.
	Art Unit	1616
	Examiner Name	Neil Levy
	Attorney Docket Number	AH0948Q
Total Number of Pages in This Submission		33

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CID	<input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Fax Cover Sheet (1 pg.); Certificate of Fax Transmission (1 pg.); Reference (1)	
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Schering-Plough Corporation	
Signature		
Printed name	William Y. Lee	
Date	May 9, 2005	Reg. No. 46,100

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Typed or printed name		Date

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Effective on 12/01/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	09/431,519
		Filing Date	11/01/1999
		First Named Inventor	Chung Shih, et al.
		Examiner Name	Neil Levy
		Art Unit	1616
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	AH0948Q
TOTAL AMOUNT OF PAYMENT		(\$ 630.00)	

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 19-0365 Deposit Account Name: Schering-Plough Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	Filing Fees	Search Fees	Examination Fees	Fees Paid (\$)
Utility	300	500	200	
Design	200	100	130	
Plant	200	300	160	
Reissue	300	500	600	
Provisional	200	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200

Multiple dependent claims 360

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x					
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$) <td>Fee Paid (\$) <td></td> <td></td> <td></td> </td>	Fee Paid (\$) <td></td> <td></td> <td></td>			
- 3 or HP =	x					
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50 =	(round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)

Other (e.g., late filing surcharge): IDS and Petition for Extension of Time 630.00

SUBMITTED BY

Signature	Registration No. (Attorney/Agent)	Telephone
William Y. Lee	46,100	(908) 298-2161
Name (Print/Type)	Date	
William Y. Lee	May 9, 2005	

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